

Program B: Patient Care

Program Authorization: R.S. 28:380 through R.S. 28:444

PROGRAM DESCRIPTION

The mission of the Patient Care Program is to provide residential living and other supports and services to individuals with developmental disabilities living at Hammond Developmental Center.

The goal of the Patient Care Program is to provide person-centered, 24-hour residential living services and supports to individuals with developmental disabilities living at Hammond Developmental Center.

The Patient Care Program is a program within Hammond Developmental Center, the purpose of which is to provide living and other supports and services for individuals with developmental disabilities living at Hammond Developmental Center.

The Patient Care Program consists of the following activities: (1) Unit Operations, (2) Staff Development, (3) Recreation, (4) Beauty/Barber Services, (5) Food and Nutritional Services (6) Quality Assurance, (7) Social Services, (8) Nursing Services, (9) Medical-Physicians, (10) Dental, (11) EEG, (12) Laboratory, (13) Respiratory Therapy, (14) Radiology, (15) Communications, (16) Occupational Therapy, (17) Physical Therapy, and (18) Pharmacy.

OBJECTIVES AND PERFORMANCE INDICATORS

Unless otherwise indicated, all objectives are to be accomplished during or by the end of FY 2000-2001. Performance indicators are made up of two parts: name and value. The indicator name describes what is being measured. The indicator value is the numeric value or level achieved within a given measurement period. For budgeting purposes, performance indicator values are shown for the prior fiscal year, the current fiscal year, and alternative funding scenarios (continuation budget level and Executive Budget recommendation level) for the ensuing fiscal year (the fiscal year of the budget document).

The objectives and performance indicators that appear below are associated with program funding in the Governor's Supplementary Recommendations for FY 2000-01. Specific information on program funding is presented in the financial sections that follow performance tables.

1. (SUPPORTING) To use person-centered approach to developing plans for 42% of the 350 individuals residing at Hammond Developmental Center (HDC).

Strategic Link: *This objective implements Goal I, Objective I.1 of the strategic plan: To use person-centered approach to developing plans for 57% of the individuals residing in Hammond Developmental Center (HDC) by June 30, 2003.*

LEVEL	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES					
		YEAREND PERFORMANCE STANDARD FY 1998-1999	ACTUAL YEAREND PERFORMANCE FY 1998-1999	ACT 10 PERFORMANCE STANDARD FY 1999-2000	EXISTING PERFORMANCE STANDARD FY 1999-2000	AT CONTINUATION BUDGET LEVEL FY 2000-2001	AT RECOMMENDED BUDGET LEVEL FY 2000-2001
S	Percentage of individuals with person-centered plans	Not applicable ¹	17.7%	42.8%	42.8%	51.2%	42.8%

¹ This performance indicator did not appear under Act 19 and therefore had no performance standard for FY 1998-99.

GENERAL PERFORMANCE INFORMATION:					
PERFORMANCE INDICATOR	PRIOR YEAR ACTUAL FY 1994-95	PRIOR YEAR ACTUAL FY 1995-96	PRIOR YEAR ACTUAL FY 1996-97	PRIOR YEAR ACTUAL FY 1997-98	PRIOR YEAR ACTUAL FY 1998-99
Number of persons served	418	398	384	376	367
Number of individuals with person-centered plans	Not applicable ¹	Not applicable ¹	Not applicable ¹	25	65

¹ HDC did not initiate person-centered planning until 1997.

2. (KEY) To provide active treatment services consistent with state and federal regulations and in accord with the level of care for and average daily census of 350 individuals with developmental disabilities living in Hammond Developmental Center (HDC).

Strategic Link: *This objective implements Goal I, Objective I.1 of the strategic plan: To provide active treatment services consistent with state and federal regulations and in accord with the level of care for and average daily census of 342 individuals with developmental disabilities living in Hammond Developmental Center.*

LEVEL	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES					
		YEAREND PERFORMANCE STANDARD FY 1998-1999	ACTUAL YEAREND PERFORMANCE FY 1998-1999	ACT 10 PERFORMANCE STANDARD FY 1999-2000	EXISTING PERFORMANCE STANDARD FY 1999-2000	AT CONTINUATION BUDGET LEVEL FY 2000-2001	AT RECOMMENDED BUDGET LEVEL FY 2000-2001
S	Average daily census	360	360	350	350	342	350
K	Total number of clients served	Not applicable ¹	367	Not applicable ²	350	350	350
K	Number of overall staff available per client	1.95	1.95	2.06	2.06	2.11	2.00
K	Average cost per client day	\$175	\$175	\$171	\$171	\$307 ³	\$307
K	Occupancy rate	Not applicable ¹	98%	Not applicable ²	97%	95%	97%

¹ This is a new indicator and it did not appear under Act 19 and therefore has no performance standard for FY 98-99.

² This is a new indicator and it did not appear under Act 10 and therefore has no performance standard for FY 1999-2000.

³ This figure includes costs for both Program A: Administration and Support and Program B: Patient Care. Figures for previous fiscal years included only patient care costs. The change in calculations is being made in an effort to standardize this calculation across all departmental facilities.

GENERAL PERFORMANCE INFORMATION:					
PERFORMANCE INDICATOR	PRIOR YEAR ACTUAL FY 1994-95	PRIOR YEAR ACTUAL FY 1995-96	PRIOR YEAR ACTUAL FY 1996-97	PRIOR YEAR ACTUAL FY 1997-98	PRIOR YEAR ACTUAL FY 1998-99
Total number of clients served	417	398	384	370	360
Average cost per client day	\$170	\$201	\$212	\$212	\$175
Occupancy rate	83%	81%	96%	98%	98%

RESOURCE ALLOCATION FOR THE PROGRAM

	ACTUAL 1998-1999	ACT 10 1999- 2000	EXISTING 1999- 2000	CONTINUATION 2000 - 2001	RECOMMENDED 2000 - 2001	RECOMMENDED OVER/(UNDER) EXISTING
MEANS OF FINANCING:						
STATE GENERAL FUND (Direct)	\$473,120	\$473,120	\$497,045	\$497,045	\$505,020	\$7,975
STATE GENERAL FUND BY:						
Interagency Transfers	21,851,064	23,317,787	23,336,117	24,344,451	23,193,268	(142,849)
Fees & Self-gen. Revenues	1,042,368	1,124,897	1,155,257	1,002,743	1,012,863	(142,394)
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
FEDERAL FUNDS	0	0	0	0	0	0
TOTAL MEANS OF FINANCING	\$23,366,552	\$24,915,804	\$24,988,419	\$25,844,239	\$24,711,151	(\$277,268)
EXPENDITURES & REQUEST:						
Salaries	\$13,928,588	\$15,946,917	\$15,946,917	\$16,584,794	\$15,704,538	(\$242,379)
Other Compensation	2,048,040	318,000	318,000	318,000	318,000	0
Related Benefits	3,067,998	2,966,910	2,966,910	3,085,586	3,013,534	46,624
Total Operating Expenses	2,388,514	2,466,983	2,466,983	2,521,652	2,357,171	(109,812)
Professional Services	592,153	1,586,546	1,586,546	1,625,458	1,586,546	0
Total Other Charges	1,179,044	1,399,909	1,472,524	1,474,116	1,496,729	24,205
Total Acq. & Major Repairs	162,215	230,539	230,539	234,633	234,633	4,094
TOTAL EXPENDITURES AND REQUEST	\$23,366,552	\$24,915,804	\$24,988,419	\$25,844,239	\$24,711,151	(\$277,268)
AUTHORIZED FULL-TIME						
EQUIVALENTS: Classified	717	717	717	717	694	(23)
Unclassified	4	4	4	4	4	0
TOTAL	721	721	721	721	698	(23)

The Total Recommended amount above includes \$24,711,151 of supplementary recommendations for this program. The supplementary recommendation amount represents full funding of this program payable out of revenues generated by the renewal of the 3% suspension of the exemptions to the sales tax.

SOURCE OF FUNDING

The Patient Care Program for Hammond Developmental Center is funded from a combination of Interagency Transfers, Fees and Self-generated Revenue, and State General Fund. Interagency Transfers include Title XIX funds received from the Department of Health and Hospitals, Medical Vendor Payments Program, as reimbursement for services provided to Medicaid-eligible residents. Fees and Self-generated Revenue includes reimbursement for employee meals and from residents for services provided based on a sliding fee scale.

ANALYSIS OF RECOMMENDATION

GENERAL FUND	TOTAL	T.O.	DESCRIPTION
\$473,120	\$24,915,804	721	ACT 10 FISCAL YEAR 1999-2000
			BA-7 TRANSACTIONS:
\$23,925	\$72,615	0	BA-7 Number 9: Transfers the Extended Family Living Services from the OCDD Community Support regional Office to the Developmental Centers. Approved September 17, 1999, by the Budget Committee.
\$497,045	\$24,988,419	721	EXISTING OPERATING BUDGET – December 3, 1999
\$0	\$314,234	0	Annualization of FY 1999-2000 Classified State Employees Merit Increase
\$0	\$308,073	0	Classified State Employees Merit Increases for FY 2000-2001
\$0	(\$2,594)	0	Teacher Retirement Rate Adjustment
\$0	\$234,633	0	Acquisitions & Major Repairs
\$0	(\$230,539)	0	Non-Recurring Acquisitions & Major Repairs
\$0	\$354,265	0	Salary Base Adjustment
\$0	(\$976,572)	0	Attrition Adjustment
\$0	(\$302,973)	(22)	Personnel Reductions
\$7,975	\$24,205	0	Other Technical Adjustments - Transfer the Extended Family Living Services from OCDD to the developmental centers (25%)
\$0	\$0	(1)	Other Technical Adjustments - Transfer out one (1) position to Agency 09-8305 Medical Vendor Administration
\$0	\$0	0	Net Means Of Financing Substitutions - Replace self-generated funds with interagency transfer funds to correctly reflect projected revenues.
\$505,020	\$24,711,151	698	TOTAL RECOMMENDED
(\$505,020)	(\$24,711,151)	(698)	LESS GOVERNOR'S SUPPLEMENTARY RECOMMENDATIONS
\$0	\$0	0	BASE EXECUTIVE BUDGET FISCAL YEAR 2000-2001
			SUPPLEMENTARY RECOMMENDATIONS CONTINGENT ON SALES TAX RENEWAL:
\$505,020	\$24,711,151	698	All Patient Care Programs
\$505,020	\$24,711,151	698	TOTAL SUPPLEMENTARY RECOMMENDATIONS CONTINGENT ON SALES TAX RENEWAL

			SUPPLEMENTARY RECOMMENDATIONS CONTINGENT ON NEW REVENUE:
\$0	\$0	0	None
\$0	\$0	0	TOTAL SUPPLEMENTARY RECOMMENDATIONS CONTINGENT ON NEW REVENUE
\$505,020	\$24,711,151	698	GRAND TOTAL RECOMMENDED

The total means of financing for this program is recommended at 98.9% of the existing operating budget. It represents 87.2% of the total request (\$28,335,764) for this program.

PROFESSIONAL SERVICES

\$80,750	Speech Pathologist - monitoring of communication skills programs, speech/language evaluations, and therapeutic services
\$43,441	Dentist - preventative and corrective dental procedures
\$17,472	EEG Technician
\$100,800	Neurologist - consultants will dictate impressions and recommendations on each client seen
\$76,423	Occupational Therapy - assessments and evaluations of clients in need of wheelchair positioning, in-service training to direct care staff, and construct and fit postural devices for clients to use in their wheelchairs
\$36,400	Physical Therapist - education, professional supervision, assistance in developing individual care plans
\$61,149	Other Professional Services - cardiologist, dermatologist, gynecologist, endocrinologist, ENT, geneticist, ophthalmologist, orthopedist, pathologist, urologist, audiologist
\$16,604	Physician - make rounds, document impressions, recommendations, and orders in clinical chart
\$122,460	Psychiatrist - psychiatric evaluations, screening patients on psychotropic drugs prior to institution of medication, follow-up exams for side effects, neurological recommendations regarding medication therapy to staff physician.
\$78,750	Psychologist - development of functional assessments which lead to the creation of behavior treatment programs
\$15,630	Radiology - reading and interpretation of all x-rays
\$12,200	Training - assist managers and staff in developing organizational strategies for implementing person-centered plans, and provide training to blind clients on how to use a cane to ambulate more independently
\$128,000	Consultants - supports, training, and services to adults with disabilities that are needed to achieve self-identified employment or habilitative outcomes
\$134,000	Sitter Service - provides health support services (bathing, changing bed linens, turning, ambulating) for hospitalized clients when required by hospital or treating physician
\$649,009	Additional Services as required
\$13,458	Professional Travel
\$1,586,546	TOTAL PROFESSIONAL SERVICES

OTHER CHARGES

\$3,102	Staff training in areas of facility annual review, cardiopulmonary training, behavior management, and handling disasters/emergencies
\$76,516	Peer review for nutritional and programmatic services
\$1,320,291	Provider-based fees - paid in accordance with LA R.S. 46:2601-2605, which briefly states that a fee of \$10.39 per patient-day will be imposed on all intermediate care facilities
\$96,820	Extended Family Living program
\$1,496,729	SUB-TOTAL OTHER CHARGES
Interagency Transfers:	
\$0	This program does not have funding for Interagency Transfers
\$0	SUB-TOTAL INTERAGENCY TRANSFERS
\$1,496,729	TOTAL OTHER CHARGES

ACQUISITIONS AND MAJOR REPAIRS

\$234,633	Funding for replacement of inoperable and obsolete equipment
\$234,633	TOTAL ACQUISITIONS AND MAJOR REPAIRS